

CLAIMS ONLY							Application Number 10605197	Filing Date		
							Applicant(s)			
* May be used for additional claims or amendments										
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	I		I				51			
2				I			52			
3				I			53			
4		I		I			54			
5				I			55			
6		I		I			56			
7				I			57			
8		I		I			58			
9				I			59			
10					I		60			
11		I		I			61			
12		I		I			62			
13		I		I			63			
14		I		I			64			
15							65			
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40							90			
41							91			
42							92			
43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
Total Indep	I		I				Total Indep			
Total Depend	13	←	13	←	←	←	Total Depend	←	←	←
Total Claims	14		14				Total Claims			